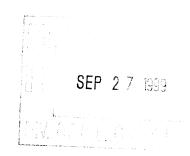
## Willis

September 24, 1999

Utah Division of Oil, Gas and Mining 1594 W. North Temple Suite 1210 Salt Lake City, UT 84114-8801



ACT/000/020 #4

Ay ACTRONION #4

Dear Certificate Holder:

ames Vitale

Enclosed is the Certificate of Insurance issued on behalf of Lodestar Energy, Inc. and subsidiaries.

Should you have any questions please feel free to call.

Sincerely yours,

Willis Corroon Corporation of New York

Enclosure

cc: Lodestar Energy, Inc. and subsidiaries Reliance National Indemnity Company Reliance National Insurance Company

> still heede to be corrected.

1	ACORD, CERTIF	ICATE OF LIABILI	TY INSU	JRANCE	PAGE 1 OF 2	DATE (MM/DD/YY) 24-SEP-1999		
W   7	орисея illis Corroon Corporation of Ne Hanover Square ew York NY 10004	96929 w York	ONLY AN	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
(212) 344-8888				COMPANIES AFFORDING COVERAGE				
				COMPANY Reliance National Indemnity Company				
Daniel Leung INSURED				A  COMPANY Reliance National Insurance Company B  COMPANY				
	Lodestar Energy, Inc. and subsidiaries							
	333 West Vine Street Suite 1700		C					
	Lexington KY 40507			COMPANY				
	)VERAGES		D					
	THIS IS TO CERTIFY THAT THE PO INDICATED, NOTWITHSTANDING AT CERTIFICATE MAY BE ISSUED OR	LICIES OF INSURANCE LISTED BELOW NY REQUIREMENT, TERM OR CONDITION MAY PERTAIN, THE INSURANCE AFFO SUCH POLICIES. LIMITS SHOWN MAY	ON OF ANY CONTI PROED BY THE PO	ract or other ( Dlicies describe(	OCUMENT WITH RESPEC HEREIN IS SUBJECT TO	T TO WHICH THIS		
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT			
A		NGB0158323	31-AUG-1999	31-AUG-2000	GENERAL AGGREGATE	\$ 2,000,000		
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG	\$ 2,000,000 \$ 2,000,000		
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY  EACH OCCURRENCE	\$ 2,000,000 \$ 1,000,000		
	OWNER'S & CONTRACTOR'S PROT				FIRE DAMAGE (Any one fire)	\$ 500,000		
					MED EXP (Any one person)	\$ 5,000		
Α	AUTOMOBILE LIABILITY  X ANY AUTO	NKA0158324	31-AUG-1999	31-AUG-2000	COMBINED SINGLE LIMIT	\$ 1,000,000		
	ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$		
	X HIRED AUTOS				BODILY INJURY	\$		
	X NON-OWNED AUTOS				(Per accident)			
					PROPERTY DAMAGE	\$		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
İ	ANY AUTO				OTHER THAN AUTO ONLY:  EACH ACCIDENT	6		
1					AGGREGATE			
	EXCESS LIABILITY				EACH OCCURRENCE	\$		
	UMBRELLA FORM				AGGREGATE	\$		
L	OTHER THAN UMBRELLA FORM				✓ WC STATU- OTH-	\$		
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	NWA0157326	15-JUL-1999	15-JUL-2000	↑ TORY LIMITS ER	1 000 000		
	THE PROPRIETOR/				EL EACH ACCIDENT  EL DISEASE-POLICY LIMIT	\$ 1,000,000 \$ 1,000,000		
ļ	PARTNERS/EXECUTIVE OFFICERS ARE:				EL DISEASE-EA EMPLOYEE	\$ 1,000,000		
	OTHER							
1								
DE	SCRIPTION OF OPERATIONS/LOCATIONS/	VEHICLES/SPECIAL ITEMS						
S	EE ATTACHED							
Ci	ERTIFICATE HOLDER		CANCELLAT					
1				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL XMODELAXIOUX X MAIL  30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,				
	Utah Division of Oil, Gas	and Mining						
1594 W. North Temple				BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY				
Suite 1210				OF ANY KIND URON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.				
	Salt Lake City UT 841	14-8801	AUTHORIZED RE	EPRESENTATIVE CONC	·Ci			
****		LODECTAGOLA	10000	/ Έ	/ / @acopd.cc	PORATION 1988		
EA(	CORD 25-S (1/95)	LODESTARGLAL	/		♥ ACUMU CC	ALECTIMENT NET SOO		

## FICATE OF INSURANCE

PAGE 2 OF 2 ISSUE DATE (MM/DD/YY) 24-SEP-1999

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

INSURED

96929

Lodestar Energy, Inc. and subsidiaries 333 West Vine Street **Suite 1700** Lexington **KY 40507** 

**PRODUCER** Willis Corroon Corporation of New York 7 Hanover Square **New York** NY 10004 (212) 344-8888

Daniel Leung

**COVERAGES** 

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE

**POLICY NUMBER** 

DATE (MM/DD/YY)

POLICY EFFECTIVE | POLICY EXPIRATION DATE (MM/DD/YY)

LIMITS

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS \*Limits shown are excess of the Insured's Self Insured Retention. General Liability includes Blasting Opertions. Permit # Act/007/001, White Oak Mines Complex. Permit # Act/007/020 Horizon Coal Mine.

CERTIFICATE HOLDER

Utah Division of Oil, Gas and Mining 1594 W. North Temple **Suite 1210** Salt Lake City UT 84114-8801

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUPH)NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES

AUTHORIZED REPRESENTATIVE

WILLIS 25W1 (9/95)

LODESTARGLAL

**© WILLIS 1995** 

Willis

September 23, 1999

SEP 2 7 1999

Utah Division of Oil, Gas and Mining 1594 W. North Temple Suite 1210 Salt Lake City, UT 84114-8801

Dear Certificate Holder:

Enclosed is the Certificate of Insurance issued on behalf of Lodestar Energy, Inc. and subsidiaries.

Should you have any questions please feel free to call.

Sincerely yours,

Willis Corroon Corporation of New York

Enclosure

cc: Lodestar Energy, Inc. and subsidiaries Reliance National Indemnity Company Reliance National Insurance Company

Wi 7 F Ne	obucer Ilis Corroon Corporation of Ne Hanover Square w York NY 10004 I2) 344-8888	ew York 96793	ONLY AN HOLDER. ALTER TH	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.  COMPANIES AFFORDING COVERAGE				
Daniel Leung				COMPANY Reliance National Indemnity Company A COMPANY Reliance National Insurance Company				
	Lodestar Energy, Inc.	and aubaidiaria	В	B COMPANY				
	333 West Vine Street							
	Suite 1700			C COMPANY D				
Lexington KY 40507								
- I	INDICATED, NOTWITHSTANDING AI CERTIFICATE MAY BE ISSUED OR	POLICIES OF INSURANCE LISTED BELOW NY REQUIREMENT, TERM OR CONDITION MAY PERTAIN, THE INSURANCE AFFOR SUCH POLICIES. LIMITS SHOWN MAY  POLICY NUMBER	ON OF ANY CONTENT OR DEPORT BY THE POHAVE BEEN REDU	RACT OR OTHER IN PROPERTY OF THE PROPERTY OF THE PROPERTY EXPIRATION	DOCUMENT WITH RESPECT TO MS.	T TO WHICH THIS  ALL THE TERMS,		
A	GENERAL LIABILITY	NGB0158323	31-AUG-1999	31-AUG-2000	OFNEDAL ADODEDATE	\$ 2,000,000		
	X COMMERCIAL GENERAL LIABILITY		31-A0G-1333	01-200	PRODUCTS-COMP/OP AGG	\$ 2,000,000		
	CLAIMS MADE X OCCUR				PERSONAL & ADVINJURY	\$ 2,000,000		
	OWNER'S & CONTRACTOR'S PROT	·			EACH OCCURRENCE	\$ 1,000,000		
					FIRE DAMAGE (Any one fire)	\$ 500,000		
					MED EXP (Any one person)	\$ 5,000		
Α	AUTOMOBILE LIABILITY	NKA0158324	31-AUG-1999	31-AUG-2000	COMBINED SINGLE LIMIT	\$ 1,000,000		
	X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$		
	X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$		
					PROPERTY DAMAGE	\$		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
ŀ	ANY AUTO				OTHER THAN AUTO ONLY:			
-			:		EACH ACCIDENT	\$		
					AGGREGATE			
ŀ	EXCESS LIABILITY				EACH OCCURRENCE	\$		
ŀ	OTHER THAN UMBRELLA FORM				AGGREGATE	\$		
В	· · · · · · · · · · · · · · · · · · ·	NWA0157326	15-JUL-1999	15-JUL-2000	X WC STATU- TORY LIMITS ER			
	EMPLOYERS' LIABILITY				EL EACH ACCIDENT	\$ 1,000,000		
-	THE PROPRIETOR/ PARTNERS/EXECUTIVE INCL				EL DISEASE-POLICY LIMIT	\$ 1,000,000		
	OFFICERS ARE: EXCL				EL DISEASE-EA EMPLOYEE	1,000,000		
	OTHER	·						
* L		vehicles/special items excess of the Insur- includes Blasting o			Retention.			

Utah Division of Oil, Gas and Mining 1594 W. North Temple **Suite 1210** Salt Lake City UT 84114-8801

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND URON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

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